

Order Form Decorative Wall Certificate

Georgia Secretary of State
Professional Licensing Boards Division
Georgia State Board of Pharmacy
237 Coliseum Drive
Macon, GA 31217
(478) 207-1640

- ❖ Complete print/type form below – your name will be printed on the wall certificate the same as on your pocket-card license.
- ❖ Submit this form with the \$50 fee by personal check, money order or cashiers check made payable to the Professional Licensing Boards Division.
- ❖ Please do not submit this form and check until you are in receipt of your license.

Name: _____

Mailing Address: _____
(Street Address)

(City) (State) (Zip)

Daytime Telephone No.: _____

License No.: _____

Return this completed form with the required fee to:

Georgia Board of Pharmacy
237 Coliseum Drive
Macon, GA 31217

Please allow six (6) weeks for delivery.